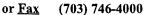
PART B - FEE(S) TRANSMITTAL

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| ppropriate. All further cor | rrespondence in duding the below or directed otherwise | Patent, advance ord | lers and notific | cation | of maintenance fees v | ired). Blocks I through 5 s vill be mailed to the current and/or (b) indicating a sep | correspondence address | |
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| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 03/22/2005 | | | | | Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, m have its own certificate of mailing or transmission. | | | |
| SUGHRUE, MION, ZINN, MACPEAK & SEAS PER Q 2100 PENNSYLVANIA AVENUE, N.W. WASHINGTON, DC 20037-3213 6/23/2005 MBEYENE2 00000190 09765411 | | | | | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO (703) 746-4000, on the date indicated below. | | | |
| 6/23/2005 NBEYENE2 OF | . • | E | " 2 1 2005 | 8 | | | (Depositor's na | |
| 1 FC:1501 2 FC:1504 | 1400.00 OP 300.00 OP | SH & T | MOEMARY CEN | | | | (Signat | |
| APPLICATION NO. | FILING DATE | F | FIRST NAMED INVENTOR | | | ATTORNEY DOCKET NO. | CONFIRMATION NO. | |
| 09/765,411 | 01/22/2001 | | Taku Ishizawa | | | Q62798 | 9456 | |
| TILE OF INVENTION: INK CARTRIDGE, AND INK-JET RECORDING APPARATUS USING THE SAME | | | | | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | | PU | BLICATION FEE | TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | NO | \$1400 | | \$300 | | \$1700 | 06/22/2005 | |
| EXAMINER ART U | | | IT CLASS-SUBCLASS | | ASS-SUBCLASS | | | |
| VO, ANH T N 286 | | | 347-086000 | | | | | |
| Change of correspondence (FR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required. | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | | | |
| ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | | | |
| Seiko Epson Corporation Tokyo, Japan lease check the appropriate assignee category or categories (will not be printed on the patent): | | | | | | | | |
| a. The following fee(s) are enclosed: 4b. Payment of Fee(s): | | | | | | | | |
| ssue Fee Publication Fee (No s Advance Order - # of | A check is attached for the NOA Fees payment. Please charge any payment deficiency and credit overpayment to PODA 19-4880. A duplicate copy of this form is attached. | | | | | | | |
| _ ` . | (from status indicated above | • | | | | | | |
| a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). he Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. OTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other part sterest as shown by the records of the United States Patent and Trademark Office. | | | | | | | | |
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| Authorized Signature Date B/21/05 | | | | | | | | |
| Typed or printed name Grant K. Rowan Registration No. 41, 278 | | | | | | | | |

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